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CONFIRMATION NO. 5189

SERIAL NUMBER 10/823,802	FILING OR 371(c) DATE 04/12/2004 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 01662/79802	
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** CONTINUING DATA ***** This appln claims benefit of 60/462,813 04/14/2003					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/22/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY HUNGARY	SHEETS DRAWING 0	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 7
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TITLE Formulations of amlodipine maleate					
FILING FEE RECEIVED 1838	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		